

12-26-06

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PTO/SB/21 (07-06)

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/663,181
Filing Date	September 15, 2003
First Named Inventor	Steven Z. Wu
Group Art Unit	1615
Examiner Name	Humera N. Sheikh

Total Number of Pages in This Submission
(excluding references)

12

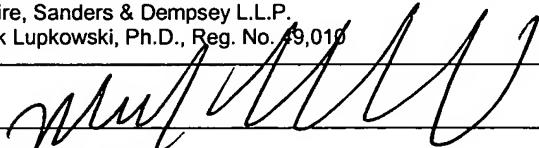
Attorney Docket Number

50623.334

ENCLOSURES (check all that apply)

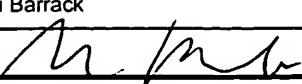
<input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization <input checked="" type="checkbox"/> Postage Paid Return Postcard <input checked="" type="checkbox"/> Amendment / Response (9 pages) <input checked="" type="checkbox"/> Amendment Transmittal Letter (in duplicate) (2 pages)	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) In/Formal ____ Sheets with Submission of Drawings Transmittal <input type="checkbox"/> Issue Fee Transmittal with PTO-85b (in duplicate) <input type="checkbox"/> Request for Continued Examination Transmittal (RCE) <input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Request for Status of Application <input type="checkbox"/> Other Enclosure(s) (please identify below):	
<input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Petition for Extension of Time (months) (in duplicate) <input type="checkbox"/> Information Disclosure Statement (in duplicate) with Form PTO-1449 listing References <input checked="" type="checkbox"/> Express Mail Label No. EV 889 012 477 US <input checked="" type="checkbox"/> Certificate of Mailing <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53			
<table border="1"> <tr> <td>Remarks</td> </tr> </table>			Remarks
Remarks			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Mark Lupkowski, Ph.D., Reg. No. 49,010
Signature	
Date	December 21, 2006

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service via Express Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date below:

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**AMENDMENT TRANSMITTAL LETTER** (Large Entity)

Applicant(s): Steven Z. Wu et al.

Docket No.
50623.334Serial No.
10/663,181Filing Date
September 15, 2003Examiner
Humera N. SheikhGroup Art Unit
1615

Invention:

Microparticle Coated Medical Device

TO THE COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as show below.

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	9	20	0	X \$50.00	\$00.00
INDEP. CLAIMS	1	3	0	X \$200.00	\$00.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$00.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$00.00

No additional fee is required for amendment.

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The Commissioner is hereby authorized to charge payment of any necessary fees associated with this communication or credit any overpayment to Deposit Account No. 07-1850
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Any additional filing fees required under 37 C.F.R. 1.16.

Any patent application processing fees under 37 C.F.R. 1.17.

Dated: December 21, 2006
 Squire, Sanders & Dempsey L.L.P.
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cc: Docket:

Mark Lupkowski, Ph.D.
Reg. No. 49,010